| Under the Repenyari                                      | v Paduation Act of 1995, no payre               | one are required to rece                                       |                         | and Trademar  | PTO/SB/21 (07-09) ad for use through 07/31/2012. OMB 0651-0031 by Office; U.S. DEPARTMENT OF COMMERCE to purpose it displays a valid OMP control purpose. |
|----------------------------------------------------------|-------------------------------------------------|----------------------------------------------------------------|-------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| TRANSMITTAL FORM                                         |                                                 |                                                                | Application             |               | 10/664,610                                                                                                                                                |
|                                                          |                                                 |                                                                | Filing Date             |               | September 16, 2003                                                                                                                                        |
|                                                          |                                                 |                                                                | First Named             | d Inventor    | Charles Wilson                                                                                                                                            |
|                                                          |                                                 |                                                                | Art Unit                |               | 1648                                                                                                                                                      |
| (to be used for all correspondence after initial filing) |                                                 |                                                                | Examiner N              | ame           | L. W. Z. Humphrey                                                                                                                                         |
| Total Number of Pages in This Submission 18              |                                                 |                                                                | Attorney Do             | cket Number   | 23239-538                                                                                                                                                 |
| ENCLOSURES (Check all that apply)                        |                                                 |                                                                |                         |               |                                                                                                                                                           |
| Fee Trans                                                | mittal Form                                     | rm Drawing(s)                                                  |                         |               | After Allowance Communication to TC                                                                                                                       |
| Fee Attached Licensing-rel                               |                                                 |                                                                | ated Papers             |               | Appeal Communication to Board of Appeals and Interferences                                                                                                |
| x Amendment/Reply Petition                               |                                                 |                                                                |                         |               | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)                                                                                            |
| I I I Allei Fillal I I I                                 |                                                 |                                                                | onvert to a application |               | Proprietary Information                                                                                                                                   |
| Affidavits/declaration(s)                                |                                                 | Power of Attorney, Revocation Change of Correspondence Address |                         | Status Letter |                                                                                                                                                           |
| X Extension of Time Request                              |                                                 | Terminal Disclaimer                                            |                         |               | Other Enclosure(s) (please Identify below):                                                                                                               |
| Express Abandonment Request                              |                                                 | Request for Refund                                             |                         |               |                                                                                                                                                           |
| Information Disclosure Statement                         |                                                 | CD, Number of CD(s)                                            |                         |               |                                                                                                                                                           |
| Certified C                                              | opy of Priority<br>(s)                          | Landscape Table on CD                                          |                         |               |                                                                                                                                                           |
|                                                          | lissing Parts/                                  | Remarks                                                        |                         |               |                                                                                                                                                           |
| Incomplete Application Reply to Missing Parts under      |                                                 |                                                                |                         |               |                                                                                                                                                           |
| ☐ 37 CFR 1.52 or 1.53                                    |                                                 |                                                                |                         |               |                                                                                                                                                           |
|                                                          |                                                 |                                                                |                         |               |                                                                                                                                                           |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT               |                                                 |                                                                |                         |               |                                                                                                                                                           |
| Firm Name                                                | MINTZ LEVIN COHN FERRIS GLOVSKY AND POPEO, P.C. |                                                                |                         |               |                                                                                                                                                           |
| Signature                                                | /Lillian Horwitz/                               |                                                                |                         |               |                                                                                                                                                           |
| Printed name                                             | Lillian Horwitz, Esq.                           |                                                                |                         |               |                                                                                                                                                           |
| Date                                                     | April 9, 2010                                   |                                                                |                         | Reg. No.      | 57,040                                                                                                                                                    |